PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0851-0035

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	unknown
Filing Date	unknown
First Named Inventor	NEWSOME, Matthew J.
Title	SYSTEM FOR RAPIDLY DISPENSING AND ACCING VALUE TO FARE CARDS
Group Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	2322-0483CP

I hereby appoint:		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Customer Number 27111 amed below:	Label here 27111
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<u> </u>		
as my/our attorney(s) business in the United	or agent(s) to prosecute the application ide States Patent and Trademark Office conn	entified above, and to transact all sected therewith.
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l am the:		
Applicant/Inver	ntor,	
Analasca as as	oard of the entire interest. See 27 OFS 6.7	
Assignee of re Statement und	cord of the entire interest. See 37 CFR 3.7 ler 37 CFR 3.73(b) is enclosed. (Form PTC). DISB(96).
	SIGNATURE of Applicant or Assigne	e of Record
Name 4	filliam L. Hoese, Agsistant General	Counsel, Cubic Corporation
Signature	Red (ASSIST :	SECRETARY, CUBIC COLP.
Date	7/21/03/	
NOTE: Signatures of all the in- forms if more than one signatu	rentors or assignees of record of the entire interest of its required, see below.".	or their representative(s) are required. Submit multiple
	forms are submitted.	

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will very depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademerk Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/S8/98 (08-00)

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STATEMENT UNDER 37 CFR 3.73(b)										
Applicant/Patent Owner: CUBIC CORPORATION										
	Filed/issue Date: October 20, 2000									
Entitled: SYSTEM FOR RAPIDLY DISPENSING AN	D ADDING VALUE TO FARE CARDS									
CUBIC CORPORATION a corpora	ation									
(Name of Assignme) (Type of A	ussignate, e.g., corporation, partnership, university, government agency, etc.)									
states that it is:										
1. It the assignee of the entire right, title, and interes	t; or									
2. an assignee of less than the entire right, title an The extent (by, percentage) of its ownership into										
in the patent application/patent identified above by virt										
A. [r] An assignment from the Inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012078, Frame 0038, or for which a copy thereof is attached.										
OR AD										
B.[] A chain of title from the inventor(s), of the pater assignee as shown below:	nt application/patent identified above, to the current									
1. From: The document was recorded in the United Real, Frame	To:									
2. From:	То:									
The document was recorded in the United	1 States Patent and Trademark Office at, or for which a copy thereof is attached.									
3. From:	_To:									
The document was recorded in the United Reel, Frame	I States Patent and Tredemark Office at, or for which a copy thereof is attached.									
[] Additional documents in the chain of title	are listed on a supplemental sheet.									
[] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]										
The undersigned (whose title is supplied below) is auti	orized to act on behalf of the assignee.									
7-21-03 Date	William L. Hosee Scott 1. JONES									
Date	Typed or printed name									
	ASSET. SECRETURELY									
	Assistant Constal Counsel, Cubic Corporation									
	Title									

Burden Hour Statement: This form is detimisted to take 0.2 hours to complete. Time will vary depending upon the needs of the included case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Weshington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Petions, Weshington, DC 20231.

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PTO/SB/01 (12/97)
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		Attorney Do	ocket	2322-04	83								
DECLARATION FOR First Named Inventor MATTHEW J. NEWSOME													
UTILITY OR DESIG		COMPLETE IF KNOWN											
PATENT APPLICAT	ION	Application	Number	09/693,3	86								
		Filing Date		остов	ER 20,	2000							
	ration itted after	Group Art L	Jnit	2876									
	Initial Filing Initial Filing Examiner Name UNKNOWN												
As a below named Inventor, I hereby declare that:													
My residence, post office address, and citizenship are as stated below next to my name.													
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:													
	SYSTEM FOR	RAPIDLY DIS	PENSING AND	ADDING VA	LUE TO	FARE CARDS	3						
			(Title of the Inv	rention)						}			
the specification of which			,							- 1			
is attached hereto										1			
OR													
X was filed on (MM/DD/Y)	m <u>oc</u>	TOBER 20, 20	00 as	United Stat	es Applie	cation Number	or PCT int	ernational		ı			
					1					- 1			
Application Number 0	9/693,386	and	was amended or	1 (MM/DD/Y	YYY)			(if applica	able.)				
I hereby state that I have revi amendment specifically refer		lerstand the co	ntents of the abo	ove identified	l specific	ation, including	g the claim	s, as amer	ided by a	any			
I acknowledge the duty to dis	sclose informat	tion which is ma	aterial to patenta	bility as defi	ned in Ti	tle 37 Code of	Federal R	egulations,	§1.56.				
I hereby claim foreign priority certificate, or §365(a) of any below and have also identifie application having a filing dat	PCT internation below, by ch	nal application necking the box	which designate , any foreign ap	ed at least or plication for p	ne count patent or	y other than th	ne United S	tates of Ar	nerica, li	sted			
Prior Foreign Application Numbers	Country		Foreign Filing (MM/DD/YYY			Priority t Claimed	Certified YE	Copy Attac	hed? NO				
					-		[[[
Additional foreign applicat	tion numbers a	are listed on a s	upplemental pri	ority data she	eet PTO	SB/02B attach	ed hereto:						
I hereby claim the benefit under		, 		United State	s provis	ional application	n(s) listed	below.					
Application Number(s) 60/160,681		Date (MM/DD/ /1999	mm ,	٦						İ			
00/100,001	lwzi		1		•	sional applicati iority data she				to			
													

[DECBCUBI00.105]

(Page 1 of 5)

DECLARATION - Utility or Design Patent Application													
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior Unite d States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S. Patent Appli Number	cation	PCT F	Parent N	lumber	Parent F (MM/DD	iling Date			arent Pa	Patent Number icable)			
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.													
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Registered practitioner(s) name/registration number listed below:													
Name			Registr	ration Num	ber	Name					Regis	tration Numb	ber
NEIL F. MARTIN JOHN L. HALLER JAMES W. MCCLAIN	1		23,088 27,795 24,536		-		R M. MUSICK N L. CONNE			-	35,623 45,34		
Direct all correspond	dence to:												
Attorney Name	Attorney Name ELEANOR M. MUSICK Reg. No. 35,623												
Address	BROWN, MAR	TIN, H	ALLER &	& McCLA	IN, LLP								
Address	1660 UNION S	660 UNION STREET											
City	SAN DIEGO	Sta	te		-	ORNIA			ZIP				
Country	USA	Tele	ephone		(619)	238-0999 Fax					(619)	238-0062	
I hereby declare that believed to be true; a punishable by fine or jeopardize the validity	nd further that the	se stat	tements v	were made	e with the	e true and the knowledge 8 of the Unit	vat all statem that willful fa led States Co	ents ma lse state ode and	ide on info ments an that such	ormation Id the like I willful fa	and be a so ma alse sta	elief are ade are tements may	y
NAME OF SOLE OR	FIRST INVENTO)R:	^	\ petition t	nas been	filed for this	unsigned inv	ventor					
Given Name (first an	id middle [if any])				Last Name	e .						
Matthew J.						Newsome							
Inventor's Signature	Waset	5	Tore	سدريه	,	Date	Date 9140						
Residence: City	San Diego	0		State	CA	Country	USA		Citizer	ship	Uni	ited States	
Post Office Address	13564 Lindar	mere L	ane								-		
Post Office Address							*						
City	San Diego			State	CA		Zip	9212	3	Count	try	USA	
NAME OF SECOND	INVENTOR:		^	petition	has been	filed for the	is unsigned	invento	ſ	-			
Given Name (first an	id middle [if any])				Last Name	е						
Graham H.	M.	十				Hilton		•					
Inventor's Signature	TION	H_				Date		٥	514	©			
Residence: City	San Diego	<u> </u>		State	CA	Country	USA		Citizer	rship	Uni	ited States	
Post Office Address	6453 Wander	mere	Drive				L		1				
Post Office Address	 						*****						·
City	San Diego			State	CA		Zip	92120	5	Count	try	USA	
Additional Inve	entors are being	namer	1 n the	suppleme	ntal Addi	itional Inver	ntor(s) sheef	(s) PTC)/SB/02A	attache	ed here	to.	

USA

Country

PTO/SB/02A (3-97)
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DECLARATION						ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 5						
Name of Additional Joint Inventor, if any:						been filed for this unsigned inventor						
Given	Name (first and middle	(if any])			F	Family N	ame or S	urname			
Paula M.			•		Miller							
Inventor's Signature	saula N	n	elle	<u> </u>			Date		9/13	9/13/2000		
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Post Office Address												
City	San Diego		State	CA		Zip	92129)	Country		USA	
Name of Additional Jo	int Inventor, if any:		A peti	ition has	been filed fo	or this unsign	ned inve	ntor				
Given I	Name (first and middle	[if any])		Family Name or Surname							
Jesse	<i>(</i> —				Shackleford							
Inventor's Signature	Jesse I Sha	uk	lefore	l	Date 9/10			9/14	9/14/2000			
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Post Office Address	6460 Convoy Court #	‡309									•	
Post Office Address												
City	San Diego		State	CA		Zip	92117		Country		USA	
Name of Additional Jo	int inventor, if any:		A peti	tion has l	been filed for this unsigned inventor							
Given N	lame (first and middle	[if any])		Family Name or Surname							
Chad S.					Sanfilippo							
Inventor's Signature	Clad Sen	Fi	ign	7			Date		9/13/00		2	
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Post Office Address					,							

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State

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92065

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City

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of 5

Name of Additional Jo	int Inventor, if any:		A petit	tion has b	een filed for	this unsigned	invento	r			
Given Name (first and middle [if any])					Family Name or Surname						
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Inventor's Signature	Markhe	Luc	y.		Date						
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor											
Given I	Vame (first and middle	e [if any])		Family Name or Surname						
Andrew					Parker						
Inventor's Signature					Date.						
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Post Office Address	19 Valley Road										
Post Office Address	Welwyn Garden Cit	у									
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Name of Additional Jo	oint Inventor, if any:		A peti	ition has	been filed fo	or this unsign	ed inve	ntor			
Given	Name (first and middle	e [if any])		Family Name or Surname						
Kevin				•	Bryant .						
Inventor's Signature	KAIBIA	5	~ .				Date				
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Post Office Address	Walton on Thames										
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 5 of 5

<u> </u>												
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given Name (first and middle [if any])						Family Name or Surname						
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Inventor's Signature	(1)	1					Date					
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Post Office Address	125 Connaught Roa	125 Connaught Road										
Post Office Address	Woking											
City	Surrey		State			Zip	GU24	0EU	Countr	у	UK	
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor												
Given I	Name (first and middle	[if any])		Family Name or Surname							
Inventor's Signature					Date							
Residence: City			State		Country	Cit			itizenship			
Post Office Address												
Post Office Address												
City			State			Zíp			Country			
Name of Additional Jo	int Inventor, if any:		A peti	tion has	been filed fo	or this unsign	ed inve	ntor				
Given I	Name (first and middle	e [if any)		Family Name or Surname							
				_			,					
Inventor's Signature							Date					
Residence: City			State		Country	Country Citizenship						
Post Office Address												
Post Office Address											-,	
City			State			Zip			Country	,		